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DIRECTORATE-GENERAL FOR HEALTH AND FOOD SAFETY

Public health
Health Security

General Working Group of the Health Security Committee Meeting

Wednesday 24 July 2024 – 15:00-17:30

Summary Report

Chair: Head of Unit, European Commission, DG SANTE B2

Participants: AT, BE, CY, DE, DK, EE, ES, FI, FR, HR, HU, IE, IT, LT, LU, MT, NL, PL, PT, RO, SE, SI, SK, IS, LI, NO, DG SANTE, DG ECHO, DG HERA, DG RTD, JRC, EFSA, ECDC, CDC, WHO

EU/EEA only

Agenda points

1. Epidemiological update on current health threats
2. Avian influenza epidemiological update in the EU/EEA
3. Avian influenza epidemiological update in the United States
4. Zoonotic avian influenza vaccination in humans
5. Enhanced influenza surveillance to detect avian influenza virus in the EU/EEA
6. ECDC survey on surveillance and targeted testing for avian influenza, EU/EEA
7. Overview on current projects on avian influenza
8. State of preparedness under rescEU on the available categories of medical countermeasures

Key messages

1. Epidemiological update on current health threats

The ECDC gave an overview of the current epidemiological update on a range of events and diseases actively being monitored, including cholera, chikungunya and dengue, respiratory viruses, human cases of influenza A(H5N2), mpox, botulism, measles, SARS-CoV-2, and human cases of avian influenza A(H5N1), as well as mass gathering events over the summer. On SARS-CoV-2, there has been evidence of increased positivity in primary and secondary care since May 2024 in several EU/EEA countries. However, there has been limited impact on hospitalizations, intensive care unit admissions and deaths. The highest test positivity in secondary care is among those above 65 years of age. The ECDC concluded that vaccination continues to be protective, especially for vulnerable population groups. Furthermore, the currently circulating and largely dominating SARS-CoV-2 variant, BA.2.86, is not expected to be associated with increased infection severity or to significantly reduce vaccine effectiveness. ECDC recommended countries to continue testing, sequencing, and reporting on activity related to SARS-CoV-2, as well as to promote vaccination and measures to reduce transmission.

On vector-borne diseases, in the EU, since the beginning of 2024 and as of 17 July, there have been 17 locally acquired cases of human West Nile Virus infections, one locally acquired case of Dengue, and eight imported cases of Oropouche virus disease. The ECDC recommended countries to remain vigilant and to test patients, especially for the imported cases of Oropouche virus disease. On food

and water-borne diseases, the ECDC reported on a possible re-emergence of *S. Enteritidis* ST11 infections linked to poultry meat, with five reported cases in Germany from March to June 2024. The ECDC also gave an overview of vaccine preventable diseases such as diphtheria, measles, meningococcal disease, and pertussis. ECDC reported increases in the number of measles cases since 2023.

Looking at global developments, ECDC emphasized the mpox outbreak in the Democratic Republic of Congo where the number of cases increased over the last months. .

2. Avian influenza epidemiological update in the EU/EEA

ECDC gave an overview on the epidemiological situation on human cases of the highly pathogenic avian influenza (HPAI) (H5N1). So far, there have been no confirmed cases of A(H5N1) infections in humans in the EU/EEA. Transmission from infected animals to humans remains a rare event and there has been no evidence of human-to-human transmission. The A(H5N1) clade 2.3.4.4b currently circulating in the EU/EEA remains mostly avian-like, it is sensitive to the antivirals used in humans, and is covered by the World Health Organization candidate vaccines authorized in the EU/EEA. ECDC's assesses the risk of human infection in the EU/EEA as low for the public, and low-to-moderate for people who are occupationally or otherwise exposed to animals infected with avian influenza virus. The ECDC continues to monitor the situation and will update its risk assessment if needed.

The European Food and Safety Authority (EFSA) provided an [epidemiological update on avian influenza in animals](#). Between 16 March and July 2024, 42 highly pathogenic avian influenza (HPAI)A(H5) virus detections were reported in domestic (16) and wild (43) birds across 13 countries in Europe. During the current reporting period, HPAI outbreaks in domestic animals were still concentrated in south-eastern Europe, with two clusters in Bulgaria and Hungary. The spatial pattern in wild birds consisted in only a few HPAI virus detections fairly dispersed across north-western to south-eastern Europe, with no detections in north-eastern Europe and only one detection at the south-western most tip of the Iberian Peninsula. In mammals, almost all HPAI A(H5N1) virus detections in Europe since 2024 have been in wild animals, with one reported case of a domestic cat. It is expected that the number of HPAI virus detections in wild birds in Europe will remain low in the coming weeks, at least until the autumn migration begins. EFSA recommends active and comprehensive surveillance, recording, investigation and reporting of cases in wild birds and wild mammals, and biosecurity measures to prevent HPAI virus introduction from wild birds to domestic establishments.

3. Avian influenza epidemiological update in the United States

The Centers for Disease Control and Prevention (CDC) in the United States gave an overview of the H5N1 situation across the United States. To date, the US Department of Agriculture (USDA) confirmed HPAI A(H5N1) virus infection in dairy herds across 13 states. The first dairy cow illness was observed in early 2024, and symptoms included a significant decrease in milk production and quality. Since 2022 until July 2024, there have been 10 reported human cases of HPAI A(H5N1), six were poultry workers, and four were dairy farm workers. All cases were clinically mild, and none were hospitalized. There has been no human-to-human transmission reported in the United States.

The CDC reported that the sequencing shows that the virus maintains primarily avian genetic characteristics and lack changes that would make the virus better adapted to infect or spread among humans. CDC has maintained a high level of influenza surveillance over the spring and summer months and there have been no indicators of unusual influenza activity in people, including avian influenza

A(H5N1). CDC concluded that the overall risk to the public remains low. However, there is greater risk for people with close, prolonged, or unprotected exposures to infected animals, or to environments contaminated by infected animals. The CDC recommends exposed individuals to monitor for symptoms after the first exposure and for 10 days after the last exposure.

4. **Zoonotic avian influenza vaccination in humans** - Protection of individuals occupationally or otherwise routinely exposed to avian influenza A(H5)

The ECDC presented its latest rapid scientific advice on the “*Protection of individuals occupationally or otherwise routinely exposed to avian influenza A(H5)*”, which aims to provide considerations about the populations who would benefit from vaccination against HPAI A(H5N1). ECDC gave an overview of the vaccines that have been authorized in the EU/EEA from Seqirus, including Aflunov, Celldemic, and the Zoonotic Influenza Vaccine Seqirus. ECDC explained that at this stage, the objective of vaccination would be to protect individuals against severe forms of the disease. The potential target groups, if the decision to deploy the vaccines is taken, should be those individuals who are occupationally or otherwise routinely exposed to animals (e.g. workers in poultry/fur animal farms, veterinarians, workers in (diagnostic) laboratories). ECDC also recommended certain measures for the protection of routinely exposed individuals such as the use of personal protective equipment, following-up exposed persons and testing, and risk communication, training, and education.

On vaccination, ECDC presented public health and occupational health considerations such as potential knowledge gaps on vaccine effectiveness on infection, transmission, or severe disease. ECDC stressed the importance of risk communication and community engagement when Member States design their vaccination strategies, and the importance of involving national Occupational Safety and Health authorities.

DG HERA gave an update on the Joint Procurement (JP) of the pandemic influenza vaccines Adjupanix and Seqirus, and on the pre-pandemic Zoonotic Influenza vaccine by Seqirus. DG HERA explained that these JPs have been signed, but there will be future contracts for which interested Member States can still participate, including for pandemic influenza vaccines and pre-pandemic zoonotic influenza vaccines. DG HERA also indicated they are working on a JP for an influenza antiviral.

5. **Enhanced influenza surveillance to detect avian influenza virus infections in the EU/EEA**

On 20 June, the ECDC published a Technical Report on [‘Enhanced influenza surveillance to detect avian influenza virus infections in the EU/EEA during the inter-seasonal period’](#) which is an update to the surveillance guidance published in 2023. The report presents a series of recommendations including raising awareness; maintaining year-round sentinel surveillance; enhancing hospital surveillance during the summer; following up on people exposed to infected animals; and reporting of any confirmed cases in the Early Warning and Response System. The report describes how to strengthen surveillance in primary and secondary care for the identification of avian influenza virus infections in the EU/EEA, including severely affected patients suspected to be infected with avian influenza, during the summer period. It aims to complement the guidance on testing and detection of zoonotic influenza virus infections in humans in the EU/EEA, and occupational safety and health measures for those exposed at work and the investigation protocol of human cases of avian influenza virus infections in EU/EEA.

6. **ECDC survey on surveillance and targeted testing for avian influenza, EU/EEA**

ECDC presented the results of a survey it ran in May 2024 with EU and EEA countries on their implementation of measures for avian influenza according to documents published by the ECDC. The survey covered a range of topics including risk assessment; human exposure, monitoring, and targeted testing; surveillance; wastewater surveillance; vaccination: seasonal influenza vaccine; vaccination: zoonotic influenza vaccine; serosurveys; and communication and data/information sharing.

7. Overview on current projects on avian influenza

DG RTD gave an overview on relevant topics and projects under Horizon Europe related to avian influenza. DG RTD presented the [Versatile Emerging infectious disease Observatory \(VEO\) project](#) which contains a Zoonotic Wildlife Use Case Scenario to improve the prediction of incursion and spread of highly pathogenic avian influenza virus via wild birds in Europe, and to assess the risk in real time of the zoonotic and pathogenic potential of emerging virus strains. Another project, [KAPPAFlu: Ecology and biology of HPAIV H5](#), aims to understand the connectivity and dynamics of HPAI H5 viruses in wild birds, poultry and the environment, including the impact of climate change. Three other projects presented included: [MOOD](#) (Monitoring Outbreak events for Disease surveillance in a data science context); [WiLiMan-ID](#): Ecology of Wild-life, Livestock, human and infectious diseases in changing environments; and [PAIR](#) (Pandemic Information to Support Rapid Response).

8. State of preparedness under rescEU on the available categories of medical countermeasures

DG ECHO gave an overview of the Union Civil Protection Mechanism (UCMP), which EU Member States and Participating States can ask for support when an emergency overwhelms national response capacities. The European Commission upgraded the UCMP and created rescEU to further protect citizens from disasters and manage emerging risks. rescEU was established as a reserve of European capacities, fully funded by the EU. On avian influenza, DG HERA explained that rescEU has medical stockpiles of antivirals, and medical devices for treating clinical conditions related to avian influenza.